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## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) ROBY, MARTHA, , ,							
	(b) Address (number and street) 3260 BANKHEAD AVE	☐ Check if address changed				Candidate's FEC Identification Number     H0AL02087		
	(c) City, State, and ZIP Code						ew	Amended
	MONTGOMERY	AL 36106-2			6-2448	Statement (N		<b>x</b> (A)
4.	Party Affiliation	5. Office Sought			6. State & Distr	rict of Candidate		
	REPUBLICAN PARTY	House			AL	02		
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
(a) Name of Committee (in full)  MARTHA ROBY FOR CONGRESS								
	(b) Address (number and street) PO BOX 195							
	(c) City, State, and ZIP Code							
	MONTGOMERY				AL	36101		
	DE	SIGNATION OF	OTHE	R AIIT	THORIZED :	COMMITTEES		
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)								
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.								
NOTE: This designation should be filed with the principal campaign committee.								
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
(c) City, State, and ZIP Code								
	I certify that I have exa	mined this Statement	and to the	best of I	my knowledge a	nd belief it is true, correct	and complet	te.
Si	gnature of Candidate					Date		
Roby, Martha, , ,			[Electronically Filed]			12/07/2016		
N	OTE: Submission of false, erroneous,	, or incomplete inform	ation may	subject tl	ne person signin	ng this Statement to penal	ties of 2 U.S.	.C. §437g.
							1	

FEC FORM 2 (REV. 02/2009)